Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For the 2	010 calen	dar year, or tax year beg	inning	, 2010, a	nd endin	g		,		
В	Check if app	licable	C Name of organization wo	odcreek Property Owne	rs' Assoc of Ha	ays Coun	ty, Inc.	D Employ	er Identif	ication Number	
	Address	s change	Doing Business As						19874		
	Name o	change	Number and street (or P O	box if mail is not delivered to str	eet addr)	Room/s	uite	E Telepho	ne numb	ег	
	Initial re	eturn	P. O. Box 1026			1		(512	2) 84	17-9889	
	Termina	ated	City, town or country		State 2	IP code + 4					
	Amende	ed return	Wimberley		TX ·	78676				304,946.	
	Applica	tion pending	F Name and address of princ	ipal officer				a group retur		ates? Yes X No	
			Current Treasurer P. C	. Box 1026 Wimbe	rley TX	78676		affiliates incl attach a list		ructions) Yes No	
<u>L</u>	Tax-exem	pt status	501(c)(3) X 501(c)	(4) ◄ (insert no)	4947(a)(1) or	527			•	,	
J	Website	e:► wo	odcreekpoa.org					exemption nu			
K		rganization	X Corporation Trust	Association Other ►	L Yea	ar of Format	ion 198	7 M/s	tate of le	gal domicile TX	
Pa	,	Summai	*								
~	1 Brie	efly descri	ibe the organization's mis	sion or most significant a	ctivities <u>MAII</u>	TAIN AN	D REPAIR	PUBLIC I	ROADWA	YS AND GREENBELTS.	
Jan											
, Q	2 Cho	eck this bo	ov • U if the organizati	ion discontinued its opera	tions or dispose	ad of mor	 e than 259				
Activities & Governance	3 Nur			erning body (Part VI, line		o or mor	e man 25	// 01 113 116	3	.5	
T 60	4 Nur			ers of the governing body)			4	1,800	
~`ë	5 Tota			ın calendar year 2010 (Pa					5	3	
글	6 Tota		r of volunteers (estimate						6		
₹ ₹	7a Tota			Part VIII, column (C), Irr					7a	0.	
-	b Net	unrelated	d business taxable incom	e from Form 990-T, line 3	4				7Ь	0	
	0 0		and aronto (Dort VIII. lu	.a. 1h\			P	rior Year		Current Year	
) e	8 Cor		s and grants (Part VIII, lir vice revenue (Part VIII, lii	•				465,1	86	286,969.	
Revenue	1	-	ncome (Part VIII, column					-8,8		7,342.	
ě	1		•	lines 5, 6d, 8c, 9c, 10c, a	nd 11e)			0,0	23.	7,542.	
	1			1 (must equal Part VIII, c		12)		456,3	62.	294,311.	
	†			t IX, column (A), lines 1-3						<u> </u>	
			I to or for members (Part								
	1	•	er compensation, employ	44.	89,629.						
69											
Expenses	b Tot	16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ► 0.									
ᅑ	17 04		06	122 240							
	17 Oth		ses (Part IX, column (A),		N I OEN			155,7 246,4		123,249.	
			•	t equal Part IX, column (/	4), line 25)			209,9		212,878.	
	+	enue less	s expenses Subtract line	18 from line 12 j.			Paginnu	ng of Curren	$\overline{}$	81,433. End of Year	
5 6		al accata	(Port V. Juno 16)					, 402, 9		859,487.	
98	21 Tot	al liabilitie	(Part X, line 16) es (Part X, line 26)	1.31 1.7	2'' 2	16		83,4		89,602.	
¥ 5	22 Not		r fund balances Subtract	line 21 from line 20	3V 2 1 2011	1 1:.	1	,319,5		769,885.	
			re Block	ime 21 from title 20		100	_	, 519, 5	01.	109,003.	
_							the best of a		and hal	of the true parent and	
con	er penalties d iplete Declara	of perjury, I d ation of preparation	leclare that I have examined this arer (other than officer) is based	return, izeluding accompanying s on all ufformation of which prepa	chedules and staterni rer has any knowledg	ents, and to je	the best of fi	ny knowleage	and bei	er, it is true, correct, and	
			C / ///								
Si	gn	Signati	ure of officer		11	<i>i/</i>	Da			"/.	
He	ere		POMA	Tuned) 1.	LEITH M.	MANE	Y TRE	- ASUNE	R,	15 /VOV.	
		Туроб	r print name and title								
		Print/Type	preparer's name	Preparer's signature		Date		Check	nf F	TIN OA 10100	
Pa	id	SANDY	STRATTON			11/13/	<u>'11</u>	self-employ	ed	10148478	
Pr	eparer	Firm's nam		NSULTING					0	1001000	
Us	e Only	Firm's addr		0				Fırm's EIN	<u>- '/4</u>	P0148498 1-2913055	
			FISCHER		TX 78623			Phone no		·	
Ma	y the IRS	discuss th	nis return with the prepare	er shown above? (see ins	tructions)					Yes X No	
_				the separate instruction		TE	EA0101 03	/25/11		Form 990 (2010)	

BAA	TEEA0102 10/06/10			Form	990	(2010)
(Expenses \$ 4e Total program service expenses ▶	including grants of \$) (R	evenue ş			<i>_</i>	
4d Other program services (Describe in		evenue \$			`	
					-	
4c (Code) (Expenses \$	including grants of \$) (Revenue	ې			,
4-00-1-	maliculum acando of . O	\ /Da	<u> </u>			
					-	
<u> </u>	including grants of \$					
were incurred in addict	ton to the stated program service to					
capital expenditures or	n_roadways_in_the_amount_of_\$147,1 ion_to_the_stated_program_service_o	/4./8				
properties and general	public areas are served. In 2010	'_				
Eagle Rock Ranchitos Se	ections 1,2,3. Approximately 2841					- - -
at Woodcreek also know	e, Village 11, Village 1 & 1a, The n as Fallbrook, Eagle Rock Heights	1 & 2.				
	22, The Health Spa Lots,					
Phase II Sections 1, 8,	9a, 9a extensions, 9b, 9b Replat					
	at includes the subdivisions of Woo					
	163,697. including grants of \$ins_common_public_roads_for_an_area					
4- /O-1-	162 607 well-to-mark (^	0 \ \ (D)				
and 501(c)(4) organizations and section expenses, and revenue, if any, for each	on 4947(a)(1) trusts are required to report the amount of ch program service reported	grants and allocatio	ris to ot	ners, th	e tota	al
Describe the exempt number achieve	ments for each of the organization's three largest progra	m services by exper	ses Se	ction 50)1(c)((3)
If 'Yes,' describe these changes on So	 i, or make significant changes in how it conducts, any prehedule O 	ogram services?		162	Δ	No
If 'Yes,' describe these new services of		ogram conveca?		Yes	x	Ne
Form 990 or 990-EZ?				Yes	X	No
2 Did the organization undertake any sig	gnificant program services during the year which were no	ot listed on the prior				
MAINTAIN AND REPAIR PUR	BLIC ROADWAYS AND GREENBELTS.					
Briefly describe the organization's mis						
	a response to any question in this Part III					
Part III Statement of Program S	owners' Assoc of Hays County, Inc.		98/46			age z

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 'Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	_3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>	9	,	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	18		
8	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
١	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
•	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part IX	11 d	Х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11e		Х
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		X
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	,.	х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

74-1987467 Page 4 Woodcreek Property Owners' Assoc of Hays County, Inc. Part IV . Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part 22 IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b X Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete 27 Х Schedule L. Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 282 Х **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV **28**c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Х Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х line 1 35 Х Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O

Form 990 (2010)

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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 1b 0 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х 1 c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-3 ments, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 32 Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) Х **b** If 'Yes,' enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х 6a solicit any contributions that were not tax deductible? **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7h c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c Х Form 8282 7d d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f Х g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 a as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 11 a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a 12b b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand 14a Х 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

Form 990 (2010) Woodcreek Property Owners' Assoc of Hays County, Inc. 74-1987467 Page 6 Part VI | Governance. Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI \mathbf{x} Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year **b** Enter the number of voting members included in line 1a, above, who are independent 1b 1,800 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Does the organization have members or stockholders? 6 X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8Ь Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10 a X **b** If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c X Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х b Other officers of key employees of the organization 15b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? Х b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization Current Treasurer P. O. Box 1026 Wimberley TX 78676 (512) 847-9889

BAA

Form 990 (2010)

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees, and former such persons

X Check this box if neither the organization	nor any r	elated	lorg	anız	zatio	n com	pen	sated any current office	cer, director, or trustee	•		
(A)	(B)				C)			(D)	(E)	(F)		
Name and title	Average		tion (k all i	that app		Reportable compensation from	Reportable compensation from	Estimated amount of other		
	hours per week (describe hours for related organizations in Schedule O)	ज्ञातंकातं ले निकस्टट ज्ञातंकात्कर	anstitutional frustee	Offr 🖭	Key employee	Higt est लभाइमाऽश्वरं employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
(1) DUANNE REDUS												
PRESIDENT	2.00	Х		Х				0.	0.	0.		
(2) JIM WESTBROOK												
VICE-PRES	2.00	X		X				0.	0.	0.		
(3) KEITH HANEY					ĺ		ĺ					
TREASURER	2.00	Х		Х				0.	0.	0.		
(4) LINDA GERMAIN												
SECRETARY	2.00	Х		Х				0.	0.	0.		
(5) MERRY MERIAN												
DIRECTOR	2.00	Х						0.	0.	0.		
(6) SUE CSEJKA												
DIRECTOR	2.00	X						0.	0.	0.		
(7) GLYNN SCHANEN												
DIRECTOR	2.00	X						0.	0.	0.		
_(8)_RICHARD_SULLIVAN												
DIRECTOR	2.00	<u> </u>						0.	0.	0.		
_(9) JANELLE DELANEY										_		
OFFICE MGR	40.00	<u>X</u>			Х			43,100.	0.	0.		
(10)												
(11)		_										
(12)												
<u>(13)</u>												
<u>(14)</u>										·		
<u>(15)</u>												
<u>(16)</u>										·		
<u>(17)</u>												
	·!											

TEEA0107 12/21/10

Part VIIT Section A. Officers, Directors, Trus	tees, r	\ey	Em			es,	an		npensated Emp	loyees	(CO	nt)_
(A)	(B)	 		-	c)	hat a		(D)	(E)		(F)	
Name and title	Average hours per week (describe hours for related organi- zations in Sch O)			Officer	, -	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amou com fr org an	stimated int of ot ipensation the anization d relate anization	ther ion on ed
_(18)												
(20)						-						
(21)												
(22)										ļ		
	-					-						
												•
(25)	-											
(26)												
(27)												
(28)												
(29)												
1 b Sub-total							>	43,100.	0.			0.
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	4						>	43,100.	0.		1411	0.
2 Total number of individuals (including but not limited	to thos	e list	ed a	abov	/e) v	who	rece			le comp	ensatı	
from the organization											Yes	No
3 Did the organization list any former officer, director	or truste	e, k	ev e	mpl	oye	e, oı	hiq	hest compensated	l employee			
on line 1a ⁷ If 'Yes,' compléte Schedule J for such in	dıvıdual		-	•	-		-	·		3		X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th	ortable an \$150	com 0,000	pen)? <i>[[</i>	satı F'Ye	on a s' c	ind (omp	othei <i>lete</i>	r compensation fro <i>Schedule J for</i>	om			
such individual							_ 1 1		and a conditional	4		X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	ompensa omplete	Sch	rror edu	n ar le J	for :	nrei such	ated 1 <i>pei</i>	rson	idividuai	5		X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	d inden	ondo	nt c	conti	ract	ore t	hat	received more tha	n \$100 000 of			
compensation from the organization	uep	enue	C	,OH (I	acii		at	Teceived more tha				
(A) Name and business addres	s							Description) of services	Compe	c) nsatio	on
2 Total number of independent contractors (including t	out not I	ımıte	ed to	tho	se I	ıste	d ab	ove) who received	I more than			

\$100,000 in compensation from the organization >

Pai	t VIII Statement of Revenue		(B)		(0)
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1 a 1 b 1 c 1 c 1 d 1 e				
E CONTRIBUTION AND OTHER ST	f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f h Total. Add lines 1a-1f Business Code				
3	———	251,450.	251,450.	0.	
2					0.
Ä	b Permits/reimbursements 9000099	25,800.	25,800.	0.	0.
PROGRAM SERVICE REVENUE	c Wsp Road fund 9000099 d e	9,719.	9,719.	0.	0.
8	f All other program service revenue		-		
PRO	g Total. Add lines 2a-2f	286,969.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	1,311.	1,311.	0.	0.
	(i) Real (ii) Personal				
	6a Gross Rents b Less rental expenses c Rental income or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other 16,666.				,
	b Less cost or other basis and sales expenses 10,635. c Gain or (loss) 6,031.				
	d Net gain or (loss)	6,031.	6,031.	0.	0.
VENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c)	3,332.	0,002		
OTHER REVENU	See Part IV, line 18 a b Less direct expenses b				
Ò	c Net income or (loss) from fundraising events	·			
	9a Gross income from gaming activities See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				ļ
	Miscellaneous Revenue Business Code				· · ·
	11a b				
	d All other revenue			· · · · · · · · · · · · · · · · · · ·	
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	294.311.	294,311.	0.	0.

Page 10

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

2 3 4 5	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described	43,100.			
3 4 5 6	the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described	43,100.			1
4 5 6	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described	43,100.			 !
5 6	Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described	43,100.		~ ~~ ~	
6	trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described	43,100.	i i		
·	disqualified persons (as defined under section 4958(f)(1)) and persons described	l l	0.	43,100.	0.
	in section 4958(c)(3)(B)				
7	Other salaries and wages	35,364.	16,800.	18,564.	0.
	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	4,800.	0.	4,800.	0.
10	Payroll taxes	6,365.	1,406.	4,959.	0.
11	Fees for services (non-employees)				
а	Management				
b	Legal	20,932.	0.	20,932.	0.
С	Accounting	5,870.	0.	5,870.	0.
d	Lobbying				
	Professional fundraising services See Part IV, line 17 Investment management fees				
g	Other				
	Advertising and promotion				
	Office expenses	2,441.	0.	2,441.	0.
	Information technology	2,189.	0.	2,189.	0.
	Royalties	0.400		0.400	
	Occupancy	2,400.	0.	2,400.	0.
18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials		1.		
	Conferences, conventions, and meetings	138.	0.	138.	0.
	Interest			====	
	Payments to affiliates	· ·			
		49,182.	48,914.	268.	0.
23	Insurance	6,098.	0.	6,098.	0.
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Office Equipment Maintenance	3,434.	0.	3,434.	0.
b	Road signs/debris removal	1,590.	0.	1,590.	0.
С	Trim/shred services	5,655.	0.	5,655.	0.
d	Beautification	1,433.	0.	1,433.	0.
е	Mileage Reimbursements	6,051.	2,931.	3,120.	0.
	All other expenses	15,836.	0.	15,836.	0.
	Total functional expenses. Add lines 1 through 24f	212,878.	70,051.	142,827.	0.
	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form 990 (2010)

		•		(A) Beginning of year		(B) End of year
	ì	Cash – non-interest-bearing		70,590.	1	90,353.
	2	Savings and temporary cash investments		106,627.	2	79,210.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		80,180.	4	-5 , 359.
	5	Receivables from current and former officers, director and highest compensated employees Complete Part			5	
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contr sponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	ibuting employers and		6	
A S	7	Notes and loans receivable, net		500.	7	0.
ASSETS	8	Inventories for sale or use	ì		8	
S	9	Prepaid expenses and deferred charges		3,390.	9	3,499.
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 698,425.			
	ь	Less: accumulated depreciation	10b 72,613.	1,073,769.	10 c	625,812.
	i	Investments – publicly traded securities			11	
	12	Investments – other securities See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		67,937.	15	65,972.
	16	Total assets Add lines 1 through 15 (must equal line	34)	1,402,993.	16	859,487.
	17	Accounts payable and accrued expenses		4,306.	17	2,738.
	18	Grants payable			18	
	19	Deferred revenue		79,106.	19	86,864.
L	20	Tax-exempt bond liabilities			20	
Ā	21	Escrow or custodial account liability Complete Part I'	V of Schedule D		21	
L	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	stees, key employees, sons Complete Part II			
E		of Schedule L	_		22	
S	23	Secured mortgages and notes payable to unrelated th	· .		23	
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities Complete Part X of Schedule D	·	02.410	25	00.600
	26	Total liabilities. Add lines 17 through 25	[V]t	83,412.	26	89,602.
Ĕ		Organizations that follow SFAS 117, check here	X and complete lines		 	
	27	27 through 29 and lines 33 and 34.		1 210 501	27	769,885.
CONET-S	27	Unrestricted net assets		1,319,581.	28	709,003.
Ī	28	Temporarily restricted net assets			29	
Q R	29	Permanently restricted net assets	re ► and complete		29	
		Organizations that do not follow SFAS 117, check he lines 30 through 34.	re – Land complete			
DZD	30	_			30	
	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
Ā	31	Retained earnings, endowment, accumulated income,			32	· · · · · · · · · · · · · · · · · · ·
B4し4才 CEの	32 33	Total net assets or fund balances.	or other fullus	1,319,581.	33	769,885.
	33	rotal fiet assets of fully palatices.		1,017,001.	33	103,000.

BAA

Form **990** (2010)

Forn	n 990 (2010) Woodcreek Property Owners' Assoc of Hays County, Inc. 74-1987	467	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets			
	*Check if Schedule O contains a response to any question in this Part XI			\Box
1	Total revenue (must equal Part VIII, column (A), line 12)		94,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,8	<u>78.</u>
3	Revenue less expenses Subtract line 2 from line 1		81,4	<u>33.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,3	19,5	<u>81.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)		31,1	29.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6	7	69,8	85.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	_ [Yes	No
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	Were the organization's financial statements audited by an independent accountant?	2b	<u> </u>	<u> </u>
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
•	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		-	
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		x
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	t 3b		
BAA		Forn	n 990 (2	2010)

TEEA0112 12/21/10

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions. OMB No 1545-0047

2010

Open to Public Inspection

Woo	odcreek Property Owners' Assoc	c of Hays County	, Inc.		74-1987467	
Par		r Advised Funds or C	ther Similar Fun	ds or Acc	ounts. Complete	e if
	the organization answered 'Yes' to	o Form 990, Part IV,	line 6.			
		(a) Donor advi	sed funds	(b) F	unds and other acco	ounts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to	or advisors in writing that to the organization's exclus	he assets held in dor ive legal control?	or advised	Yes	☐ No
6	Did the organization inform all grantees, donors used only for charitable purposes and not for the purpose conferring impermissible private benefits the conferring impermissible private benefits.	ne benefit of the donor or o	riting that grant funds lonor advisor, or for a	can be any other	Yes	☐ No
Par	t II Conservation Easements. Compl	ete if the organizatio	n answered 'Yes'	to Form 9	90, Part IV, line	7.
2	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., re Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organizatio last day of the tax year	ecreation or education)	Preservation of Preservation of	of a certified t	ally important land a nistoric structure conservation easem	
	last day of the tax year				Held at the End of th	e Tax Year
,	Total number of conservation easements			2a		
	Total acreage restricted by conservation easem	nents		2b	'	
	: Number of conservation easements on a certifi		ed in (a)	2c		
	Number of conservation easements included in				•	
	structure listed in the National Register			2d		
3	Number of conservation easements modified, to tax year ▶	ransferred, released, extin	guished, or terminate	d by the orga	inization during the	
4	Number of states where property subject to cor	nservation easement is loc	ated <a>			
5	Does the organization have a written policy reg and enforcement of the conservation easement	ts it holds?			Yes	☐ No
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcin	g conservation easen	nents during t	the year	
7	Amount of expenses incurred in monitoring, ins ▶ \$	specting, and enforcing co	nservation easements	s during the y	ear	
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)^7$	line 2(d) above satisfy the	requirements of sec	tion	Yes	☐ No
9	In Part XIV, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements.	orts conservation easemer o the organization's financi	ts in its revenue and al statements that de	expense states or scribes the or	ement, and balance ganization's accoun	sheet, and ting for
Par	till Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Histori wered 'Yes' to Form	cal Treasures, or 1990, Part IV, line	Other Sin 8.	nilar Assets.	
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance	held for public exhibition,	education, or research	ue statement ch in furtherai	and balance sheet wance of public service	vorks of e, provide,
ŧ	 If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items 	SFAS 116 (ASC 958), to r d for public exhibition, edu	eport in its revenue s cation, or research in	tatement and furtherance	balance sheet work of public service, pro	s of art, ovide the
	(i) Revenues included in Form 990, Part VIII,	line 1			> \$	
	(ii) Assets included in Form 990, Part X				► \$	
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or o 16 (ASC 958) relating to t	ther similar assets fo nese items:	r financial ga	in, provide the follow	ving
â	Revenues included in Form 990, Part VIII, line	1			► \$	
ŧ	Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2010 Woodci				74-198			Page Z
Part III Organizations Mainta	ining Collection	ons of Art, Histo	orical Treasures, or	r Other Similar Ass	ets (co	<u>ontinu</u>	<u>ed)</u>
 Using the organization's acquisite items (check all that apply) 	on, accession, an	d other records, che	ck any of the following t	hat are a significant use	of its co	ollectio	า
a 🔲 Public exhibition		d Loan	or exchange programs				
b Scholarly research		e 📙 Other					
c Preservation for future genera	ations						
4 Provide a description of the organ Part XIV	nization's collectio	ns and explain how	they further the organiz	ation's exempt purpose	ın		
5 During the year, did the organizat assets to be sold to raise funds ra	ather than to be m	naintained as part of	f the organization's colle	ection?	Yes		No
Part IV Escrow and Custodia	l Arrangemen	ts. Complete if	organization answe	ered 'Yes' to Form 9	90, Pa	art IV,	line
9, or reported an amo	unt on Form 9	90, Part X, line	<u> </u>				
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or	other intermediary	for contributions or other	r assets not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV and c	omplete the followin	g table [.]				
					Amount	:	
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1e	·		
f Ending balance				1f			
2a Did the organization include an ai	mount on Form 99	90, Part X, line 21?			Yes	L	No
b If 'Yes,' explain the arrangement							
Part V Endowment Funds. Co	 				T		
	(a) Current year	(b) Prior yea	r (c) Two years back	k (d) Three years back	(e) f	our year	s back
1 a Beginning of year balance					_		
b Contributions					1		
c Net investment earnings, gains, and losses							
d Grants or scholarships							
 Other expenditures for facilities and programs 							
f Administrative expenses					<u> </u>		
g End of year balance					<u> </u>		
2 Provide the estimated percentage	e of the year end t	palance held as.					
a Board designated or quasi-endow	ment 🟲	<u> </u>					
b Permanent endowment ►	<u></u> ₹						
c Term endowment ►	 8						
3a Are there endowment funds not in	n the possession o	of the organization t	hat are held and admini	stered for the	_		
organization by	•	3				Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related o	-				3b		
4 Describe in Part XIV the intended							
Part VI Land, Buildings, and							
Description of investment	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) E	Book va	lue
1 a Land	<u> </u>						
b Buildings	<u></u>						
c Leasehold improvements							
d Equipment							
e Other		0.	698,425.	72,613.	 .		812.
Total. Add lines 1a through 1e (Column	n (d) must equal F	orm 990, Part X, co	olumn (B), line 10(c))	<u> </u>			812.
BAA				Sched	lule D (F	orm 99	0) 2010

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	dule D (Form 990) 2010 Woodcreek Property Owners' Assoc of Hays Cou		74-1987467	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Statements	T	
1	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments		<u> </u>	
5	Donated services and use of facilities	•		
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8	4.0		
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		or Poturn	
	t XII Reconciliation of Revenue per Audited Financial Statemen	is with Revenue p	1	
	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12			
		2a		
	Net unrealized gains on investments	2 b		
	Donated services and use of facilities	2c	 	
	: Recoveries of prior year grants	2d		
	Other (Describe in Part XIV)	[20]		
	Add lines 2a through 2d		2e 3	
	Subtract line 2e from line 1		3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4.0		
	Investments expenses not included on Form 990, Part VIII, line 7b	4a 4b		
	o Other (Describe in Part XIV) : Add lines 4a and 4b	40	4.0	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		4c	
	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts With Eypense	•	
	Total expenses and losses per audited financial statements	into With Expense.	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	Donated services and use of facilities	2a		
	Prior year adjustments	2b		
	: Other losses	2c		
	Other losses I Other (Describe in Part XIV.)	2d	 	
	Add lines 2a through 2d	1 201	2e	
	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
_	Investments expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV)	4b		
	: Add lines 4a and 4b	· · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
	t XIV Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, line additional information			
·				
				·
BAA	TEEA3304 02/11/11		Schedule D (For	m 990) 2010
	IEEA3304 02/11/11		Concade w (1 Off	

Schedule D (Form 990) 2010	Woodcreek Property Owners' Assoc of Hays County, Inc.	74-1987467	Page 5
PantXIV Supplementa	Woodcreek Property Owners' Assoc of Hays County, Inc. I Information (continued)		
•			
•			
	~~		
			- -
		_	

TEEA3305 07/16/10

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Schedule **D** (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization Employer identification number 74-1987467 Woodcreek Property Owners' Assoc of Hays County, Inc. Pt VI-C, Line 19 Quarterly Membership Meetings Pt_VI-B, Line 11a Directors review at Monthly Board of Directors Meeting Pt_VI-A, Line 6 Members Pt VI-A, Line 7a Members Elect the Directors at the annual meeting in January Pt_VI-C, Line 19 Provided Upon Request Pt VI-A, Line 5 NUMBEROUS SECTIONS VOTED TO CHANGE FROM THE WPOA TO WSPOA Pt_VI-A, Line 4 THE MAJOR CHANGE IS 1.03 PROPERTY AFFECTED BY THESE BYLAWS, WHICH STATES THE REMAINING SECTIONS AFTER THE MEMBERS VOTED TO CHANGE TO WSPOA. ADDITIONAL THERE ARE SEVERAL MINOR CHANGES TO THE BYLAWS.

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2010

Attachment Sequence No 67

Name(s) shown on return Identifying number Woodcreek Property Owners' Assoc of Hays County, Inc.
Business or activity to which this form relates 74-1987467

Part I Election To Expense Certain Property Under Section 179 Note: If you have any isked property. Compilee Part V before you complete Part I	Note: If you have any listed property, complete Part V before you complete Part I 1 2 2 3 3 3 3 3 3 3 3	For	m <u>990 / Form 990</u>	EZ								
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	• Note: Fo	or any vehicle fo (a) through (c)	or which you ar of Section A,	e using ti all of Sec	he standa tion B, ai	ird mile nd Sect	age rate ion C if	e or d appli	leducting le cable	ase exp	ense, c	omplete	опіу 24	a, 24b,	
	Sectio	n A — Deprecia	tion and Othe	r Informa	tion (Cau	tion: S	ee the ıı	nstruc	ctions for li	nıts for	passen	ger auto	mobiles.)	
24 a	Do you have eviden	ce to support the bu	ısıness/investmen	t use claime	ed?		Yes	וְרַ	No 24b If 'Y	es, is the	evidence	written?		Yes	No
т.	(a)	(b) Date placed	(c) Business/	(d) Cost		Rasis fo	(e) or deprecia	tion	(f) Recovery		g) thod/				(i) ected
ıy	pe of property (list vehicles first)	in service	investment use percentage	other b	asis	(busine:	ss/investm se only)		period		ention	ded	uction	secti	on 179 ost
25	Special deprec		for qualified I				ervice di	uring	the tax yea	ar and	Τ				
		1 50% in a quali				ns)	-				25			<u> </u>	
26	Property used r	nore than 50%		usiness	use.							<u> </u>			•
							·								
27	Property used 5	0% or less in a	qualified busing	ness use								ı		-	
								\dashv						_	
								\dashv		-					
28	Add amounts in	column (h), lin	es 25 through	27. Enter	here and	d on line	e 21, pa	ge 1	, ,	1	28			1	
	Add amounts in	• • •	-										29		
					B – Infor										
	plete this section ur employees, fi														cles
io yc	ur employees, n	i st answer the	questions in or	1	······································		- 1	,cptic	(c)	(0		(6		(1	n
30	Total business/			(a) Vehicle 1		, ,		ehicle 3	Vehi	•	Vehi	•		cle 6	
	during the year (do not include commuting miles)														
31	Total commuting m	iles driven during t	he year												
32	Total other pers miles driven	sonal (noncomn	nuting)												-,
33	Total miles driv		ear. Add		ľ										
	mics so through			Yes	No	Yes	No	Ye	s No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty		ersonal use												
35	Was the vehicle than 5% owner	e used primarily or related pers					:								
36	Is another vehicles	cle available for	•												
	porgoniar ago	Section	C - Question	s for Emp	oloyers W	/ho Pro	vide Ve	hicle	s for Use b	y Their	Employ	ees			
Ansv 5% d	ver these question	ons to determine d persons (see i	e if you meet a	n except	ion to cor	npleting	g Sectioi	n B fo	or vehicles	used by	employ	yees who	are no	t more t	han
37	Do you maintai		cy statement th	at prohib	its all per	rsonal u	ise of ve	hicle	s, includino	commi	ıtıng,			Yes	No
38	Do you maintai employees? Se	n a written police the instruction	cy statement th	at prohib used by	its persoi corporate	nal use	of vehic s, direct	les, e	except com or 1% or m	muting, ore own	by you ers	r			
39	Do you treat all	use of vehicles	by employees	as perso	onal use?										
40	Do you provide vehicles, and re	more than five	vehicles to you ation received	ur employ	ees, obta	ain infor	mation	from	your emplo	yees at	out the	use of t	he		
41	Do you meet th Note: If your ar	e requirements nswer to 37, 38,	concerning qu 39, 40, or 41	alified au is 'Yes,' o	tomobile do not coi	demon	stration Section	use? B for	(See instru the covere	ictions.) d vehici	es				
	t VI Amort	ization										(e)	······································	· · · · · · · · · · · · · · · · · · ·	
Pai							(c)		((f)	

43

Amortization of costs that began before your 2010 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

Miscellaneous Statement

Form 990, Line 58	
Other Assets - Lots Acquired	
The deeds on properties within the jurisdiction	
of Woodcreek Property Owners' Association	
grant a lien to the Association. This	
gives the Association the right to file	
liens on those properties with unpaid	
maintenance fees. Occasionally, the	
Association acquires lots by quitclaim	
deeds from property owners, in payment	
of maintenance fees due on the lots.	
Beginning in 1999, the Association	
accepted lots in the flood plane in	
exchange for unpaid maintenance fees	
with proof that the property taxes were	
paid. The Association is holding these	
lots for use as a green belt or park	
area in the future.	
Other properties are to be offered for	
sale to the general public, with care	
given to prevent acquisition or benefit	
by any parties related to the Association.	

Total

Supporting Statement of:

Form 990 p 9/Sales of Other Assets

	Description	Amount			
13.351		2,774			
13.313		2,774			
13.202		2,733			
14.11		5,555			
13.21		2,830			

Supporting Statement of:

Form 990 p 9/Personal Cost Basis

Description	Amount
13.351	4,239
13.313	4,031
13.202	136
14.11	510
13.21	1,719
Total	10,635

Supporting Statement of:

Form 990 p 11/Line 19, column (A)

Description	Amount
PREPAID MEMBERSHIP DUES	79,106.
Total	79,106.

Supporting Statement of:

Form 990 p 11/Line 19, column (B)

Description	Amount
PREPAID MEMBERSHIP DUES	86,864.
Total	86,864.